American National Standard

ANSI/AAMI/ IEC 60601-2-4:2010/ A1:2018

(Consolidated Text)

Medical electrical equipment—Part 2-4: Particular requirements for the basic safety and essential performance of cardiac defibrillators, including Amendment 1

AAMI
Advancing Safety in Health Technology

Medical electrical equipment—Part 2-4: Particular requirements for the basic safety and essential performance of cardiac defibrillators, including Amendment 1

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AAMI

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Abstract: This consolidated version includes the amendment which updates references and clarifies the scope as well as provides additional information for AEDs, defibrillator electrodes, audible warnings and cables.

Keywords: cardiac defibrillators, automated external defibrillators, defibrillator electrodes

AAMI Standard

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Committee representation

Association for the Advancement of Medical Instrumentation

Defibrillator Committee

The adoption of IEC 60601-2-4:2010/A1 as an amendment to an existing national standard, ANSI/AAM/IEC 60601-2-4:2010, was initiated by the AAMI Defibrillator Committee. U.S. representatives played an active role in developing the IEC standard.

Committee approval of the standard does not necessarily imply that all committee members voted for its approval.

At the time this document was published, **the AAMI Defibrillator Committee** had the following members:

Cochair: Oscar Tovar-Calderon, MD

Members:
Regis DeSilva, MD, American College of Surgeons
Ram Dhurjaty
Nicole Hurley, PhD, WL Gore & Associates
Janice Jenkins, PhD, University of Michigan School of Dentistry
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Alternates:
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Nancy Moreyra, Philips
Bob Zito, Stryker Instruments

NOTE—Participation by federal agency representatives in the development of this document does not constitute endorsement by the federal government or any of its agencies.

Background of ANSI/AAMI adoption of IEC 60601-2-4:2010/A1:2018

As indicated in the foreword to the main body of this document (page vii), the International Electrotechnical Commission (IEC) is a worldwide organization for standardization comprising of all national electrotechnical committees. The United States is one of the IEC members that took an active role in the development of this amendment, which was developed by the IEC Technical Subcommittee 62D, Electromedical equipment.

U.S. participation in IEC/SC 62D is organized through the U.S. Technical Advisory Group (TAG) for IEC/SC 62D, administered by AAMI on behalf of the U.S. National Committee of the American National Standards Institute. The U.S. made a considerable contribution to this International Standard.

AAMI encourages its committees to harmonize their work with International Standards to the extent possible. Upon review of the final draft of the Amendment to IEC 60601-2-4, the AAMI DF, Defibrillator Committee decided to adopt it verbatim. This consolidated version contains the Amendment as well as the 2010 standard which has already been adopted by AAMI.

AAMI and ANSI procedures require that standards be reviewed every five years and, if necessary, revised to reflect technological advances that may have occurred since publication.

AAMI (and ANSI) have adopted other IEC and ISO standards. See the Glossary of Equivalent Standards for a list of IEC and ISO standards adopted by AAMI, which gives the corresponding U.S. designation and the level of equivalency with the IEC and ISO standard.

NOTE Users of this standard are advised that this document is an AAMI identical adoption of an IEC document and that the following international conventions have been carried over to the AAMI publication:

- British English spelling (e.g. colour instead of color)
- Use of SI units (e.g. metres instead of feet, Celsius instead of Fahrenheit, etc.)
- Decimal comma instead of a decimal point (e.g. 1 000,15 instead of 1,000.15)

The concepts incorporated in this standard should not be considered inflexible or static. This standard, like any other, must be reviewed and updated periodically to assimilate progressive technological developments. To remain relevant, it must be modified as advances are made in technology and as new data come to light.

This standard reflects the conscientious efforts of concerned health care professionals and medical device manufacturers to develop a standard for those performance levels that can be reasonably achieved at this time.

Suggestions for improving this standard are invited. Comments and suggested revisions should be sent to Standards Department, AAMI, 901 N. Glebe Road, Suite 300, Arlington, VA 22203.

NOTE-This background does not contain provisions of the American National Standard, *Medical electrical equipment – Part 2-4: Particular requirements for the basic safety and essential performance of cardiac defibrillators,* (ANSI/AAMI/IEC 60601-2-4), but it does provide important information about the development and intended use of the document.

NOTE-Beginning with the foreword on page vii, this American National Standard is identical to IEC 60601-2-4, A1.

Foreword

1) The International Electrotechnical Commission (IEC) is a worldwide organization for standardization comprising all national electrotechnical committees (IEC National Committees). The object of IEC is to promote international co-operation on all questions concerning standardization in the electrical and electronic fields. To this end and in addition to other activities, IEC publishes International Standards, Technical Specifications, Technical Reports, Publicly Available Specifications (PAS) and Guides (hereafter referred to as "IEC Publication(s)"). Their preparation is entrusted to technical committees; any IEC National Committee interested in the subject dealt with may participate in this preparatory work. International, governmental and non-governmental organizations liaising with the IEC also participate in this preparation. IEC collaborates closely with the International Organization for Standardization (ISO) in accordance with conditions determined by agreement between the two organizations.
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DISCLAIMER
This Consolidated version is not an official IEC Standard and has been prepared for user convenience. Only the current versions of the standard and its amendment(s) are to be considered the official documents.

This Consolidated version of IEC 60601-2-4 bears the edition number 3.1. It consists of the third edition (2010-12) [documents 62D/857/FDIS and 62D/878/RVD] and its amendment 1 (2018-02) [documents 62D/1549/FDIS and 62D/1555/RVD]. The technical content is identical to the base edition and its amendment.

This Final version does not show where the technical content is modified by amendment 1. A separate Redline version with all changes highlighted is available in this publication.

International standard IEC 60601-2-4 has been prepared by IEC subcommittee 62D: Electromedical equipment, of IEC technical committee 62: Electrical equipment in medical practice.

This third edition constitutes a technical revision, revised to structurally align it with IEC 60601-1:2005 and to implement the decision of IEC SC 62A that the clause numbering structure of particular standards written to IEC 60601-1:2005 would adhere to the form specified in ISO/IEC Directives, Part 2:2004. The aim of this third edition is to bring this particular standard up to date with reference to the third edition of the general standard through reformatting and technical changes.

The principle technical changes are as follows:

- 201.8.8.3, test 4: added additional test options;
- Figure 201.105: provided example of stainless steel plates. Added note for 10 Hz generator or shockable rhythm generator;
- Figure 201.101: Changed orientation of the lower diode at the oscilloscope connection;
- 202.6.1, .2, .4: "Additions" and "Replacements" corrected to be as originally intended;
- 201.101.1: Clarified preconditioning of a non-rechargeable battery;
- 201.3.207: Clarified definition of DUMMY COMPONENT;
- 201.15.4.101: In paragraph b), added reduced flex requirements for sterilizable internal paddles with specified limit on sterilization cycles;
- 201.15.4.3.103: Added an option for devices having non-changeable pre-programmed energy-setting sequences;
- 201.102.3.1, 2: Changed from specified defibrillation cycles to use of pre-programmed defibrillation sequence;
- 202.6.2.2.1: Changed ESD discharge sequence to match IEC 60601-1-2, third edition.

This publication has been drafted in accordance with the ISO/IEC Directives, Part 2.

In this standard, the following print types are used:

– Requirements and definitions: roman type.
– *Test specifications: italic type.*
– Informative material appearing outside of tables, such as notes, examples and references: in smaller type. Normative text of tables is also in a smaller type.
– TERMS DEFINED IN CLAUSE 3 OF THE GENERAL STANDARD, IN THIS PARTICULAR STANDARD OR AS NOTED: SMALL CAPITALS.

In referring to the structure of this standard, the term

– “clause” means one of the seventeen numbered divisions within the table of contents, inclusive of all subdivisions (e.g. Clause 7 includes subclauses 7.1, 7.2, etc.);
– “subclause” means a numbered subdivision of a clause (e.g. 7.1, 7.2 and 7.2.1 are all subclauses of Clause 7).

References to clauses within this standard are preceded by the term “Clause” followed by the clause number. References to subclauses within this particular standard are by number only.

In this standard, the conjunctive “or” is used as an “inclusive or” so a statement is true if any combination of the conditions is true.

The verbal forms used in this standard conform to usage described in Annex H of the ISO/IEC Directives, Part 2. For the purposes of this standard, the auxiliary verb:

– “shall” means that compliance with a requirement or a test is mandatory for compliance with this standard;

– “should” means that compliance with a requirement or a test is recommended but is not mandatory for compliance with this standard;

– “may” is used to describe a permissible way to achieve compliance with a requirement or test.

An asterisk (*) as the first character of a title or at the beginning of a paragraph or table title indicates that there is guidance or rationale related to that item in Annex AA.

A list of all parts of the IEC 60601 series, published under the general title *Medical electrical equipment,* can be found on the IEC website.

The committee has decided that the contents of the base publication and its amendment will remain unchanged until the stability date indicated on the IEC web site under "http://webstore.iec.ch" in the data related to the specific publication. At this date, the publication will be

- reconfirmed,
- withdrawn,
- replaced by a revised edition, or
- amended.

Medical electrical equipment—Part 2-4: Particular requirements for the basic safety and essential performance of cardiac defibrillators, including Amendment 1

201.1 Scope, object and related standards

Clause 1 of the general standard[1] applies, except as follows:

201.1.1 * Scope

Replacement:

This International Standard applies to the BASIC SAFETY and ESSENTIAL PERFORMANCE of CARDIAC DEFIBRILLATORS, hereafter referred to as ME EQUIPMENT.

If a clause or subclause is specifically intended to be applicable to ME EQUIPMENT only, or to ME SYSTEMS only, the title and content of that clause or subclause will say so. If that is not the case, the clause or subclause applies both to ME EQUIPMENT and to ME SYSTEMS, as relevant.

HAZARDS inherent in the intended physiological function of ME EQUIPMENT or ME SYSTEMS within the scope of this standard are not covered by specific requirements in this standard except in 7.2.13 and 8.4.1 of the general standard.

NOTE See also 4.2 of the general standard.

This particular standard does not apply to implantable DEFIBRILLATORS, remote control DEFIBRILLATORS, or separate stand-alone cardiac monitors (which are standardized by IEC 60601-2-27:2011 [2][2]). Cardiac monitors which use separate ECG monitoring electrodes are not within the scope of this standard unless they are used as the sole basis for AED rhythm recognition detection or beat detection for synchronized cardioversion. DEFIBRILLATOR electrodes as described in 201.108 can also be used for ECG monitoring; however, due to the larger electrode area, the requirements of IEC 60601-2-27 are not applicable for DEFIBRILLATOR ELECTRODES.

Defibrillation waveform technology is evolving rapidly. Published studies indicate that the effectiveness of waveforms varies. The choice of a particular waveform including waveshape, delivered energy, efficacy, and safety has been specifically excluded from the scope of this standard.

However, due to the critical importance of the therapeutic waveform, comments have been added to the rationale which addresses considerations in waveform selection.

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1 The general standard is IEC 60601-1:2005, *Medical electrical equipment – Part 1: General requirements for basic safety and essential performance*.

2 Numbers in square brackets refer to the bibliography.